

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|-------------|----------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | <i>fl</i> | <i>1141</i> | <i>12/3/01</i> |
| RESPONSE FORMALITY REVIEW | <i>MA</i> | <i>825</i> | <i>3/27/02</i> |

INDEX OF CLAIMS

BEST AVAILABLE COPY

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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1545
12/3/01
947
03/27/02